

UNCLASSIFIED

**Defense Technical Information Center  
Compilation Part Notice**

**ADP013430**

**TITLE:** Globalization, the Infectious Diseases and Croatian Civil Defense

**DISTRIBUTION:** Approved for public release, distribution unlimited

**This paper is part of the following report:**

**TITLE:** Chemical and Biological Medical Treatment Symposium - Industry  
II World Congress on Chemical and Biological Terrorism

**To order the complete compilation report, use: ADA411272**

The component part is provided here to allow users access to individually authored sections of proceedings, annals, symposia, etc. However, the component should be considered within the context of the overall compilation report and not as a stand-alone technical report.

**The following component part numbers comprise the compilation report:**

**ADP013371 thru ADP013468**

UNCLASSIFIED

## **61. GLOBALIZATION, THE INFECTIOUS DISEASES AND CROATIAN CIVIL DEFENSE**

Tomo Sugnetić, Nevenka Sugnetić, Ministry of the Interior of the Republic of Croatia  
10000 Zagreb, Ilica 335, Croatia

### **INTRODUCTION**

Man's natural progress, including development of global science and technology increase. Republic of Croatia, like other countries in central, southern and eastern Europe, undergoing a war period, and a period of political, economic, social and the other transition. Change, however, has not been confined only to these various areas, but has affected all sectors economic, social, civil and military defense and specially, the health sector where a various infectious diseases play one of major role. One of areas where the effect of change is certainly being felt is in the global and health sector. The main feature of infectious diseases comes from their global occurrence. Infective diseases are permanent danger for population, environment and determinant of health status. In the past, infective diseases and great epidemics of infective diseases resulted in high incidence, morbidity and mortality and dominant irreversible effect. Therefore, the world community has to study these infections and try to develop efficient approaches to their diagnosis, prophylaxis and treatment. Civil defense, Health policy, the structure and organization of defense and health services and most importantly, health status have all been affected by the transition, which started in 1990 and still continuing.

### **METHODOLOGY**

Working methods imply normative, analytical, comparative and system analysis method (1).

### **DISCUSSION**

In the "global village" of the late twentieth century it is increasingly evident that the health of populations is dependent on numerous external factors, which include market forces, environmental hazardous accesses to as communications and technology and cultural influences (2). At the end twentieth century global transnational factors as macroeconomic prescription e.g. structural adjustment policies and "downsizing", trade, travel, migrations and demographic e.g. increased refugee populations growth, food security issues, environmental degradation and unsustainable world consumption patterns, global and local environmental health impact-long-term impact negative, technology, foreign policies based national self-interest, communication and media e.g. global advertising of harmful commodities such as tobacco, alcohol, psychoactive drugs - long-term impact negative marketing of health damaging behavior, erosion of cultural diversity and social cohesion, with various consequences and possible negative impact on health will be permanent danger for the Croatian population for life, environment and determinants of health status (2).

As a result of its geostrategical, general and defensive characteristic, the population and territory of Republic of Croatia can be exposed to danger from effect of natural, technological and war disasters. The effect of these disasters (including droughts, floods, fires and chemical contamination) can manifest in increased diseases and susceptibility to epidemics. Larger epidemics can occur in wartime as well as in peace (1). A part of continuing monitoring of Croatian populations health status and quality of life. in 2000. CNIOPH registered ninety-six (96) larger epidemic of outbreaks with 2035 cases (3). In Republic of Croatia, the immunizable diseases have either totally disappeared (diphtheria,

poliomyelitis) or their incidence has been drastically reduced by more than 95% (morbili, parotitis, rubeola, pertussis, tetanus, tuberculosis) (4.3). In recent years the incidence of diseases of low standards of hygiene or living, i.e. typhus, bacillary dysentery and hepatitis A, has clearly regressed to the levels typical of developed countries. Stagnation of the incidence of tuberculosis in the past few years (due to war and its aftermath) was succeeded in 1999 by a favorable trend of continuing decline in the incidence (3.4). A very favorable low permanent and sporadic incidence is noted in venereal diseases syphilis and AIDS with gonorrhea also exhibiting a favorable decreases in the incidence and its maintenance too at a low sporadic level (3.4).

Very extensive diseases prevention measures through meat control taken by the Veterinary Service and antiepidemic interventions and preventive measures taken by the Health Service, have resulted in markedly fewer trichinosis cases (though still a sizable number) than in the previous time/years (4). In Croatia, the bacteriological diagnosis of tuberculosis had continued the declining trend in the number of new cases and relapses. Compared with the previous years, the number of resistant has declined (3.4). Today, in April 2001, in Croatia non-registrated diagnosis of BSE or diagnosis of Stomatitis aphtosa infectiosa, epizootica. Assessments and Plans for protecting civilians from the consequences of larger epidemic of infectious diseases and the other diseases requires the permanent engagement of health protection services in Croatia. From the technical standpoint, all anti epidemiological measures and parameters for threat assessment and planing for protection and consequences of larger epidemics of infectious diseases (preventive, operative, technical and organizational) will become even more significant. These measures can only be drafted through coordinated utilization of medical doctrine, legislation, international agreement and conventions and modern international standards (1). Communicable diseases or infectious diseases unknown in Europe for decades have re-emerged (Diphtheria) or imported cases (cholera, malaria) and whereas in the past epidemics were rare and confined mainly to other regions, they now contribute significantly to the overall incidence of such diseases worldwide. At the same time, new diseases have been spreading, and microbial resistance to some drugs makes the control of infectious diseases difficult. New diseases in animals also pose increased risks, one example being BSE (bovine spongiform encephalitis). In many countries, the incidence of tuberculosis is increasing and drug-resistant strains of the disease are spreading. AIDS incidence appears to have stabilized in most countries in western Europe, but an epidemic related to injecting drug use stills one the rise in some of these countries. In the NIS (newly independent states), HIV infection has been spreading rapidly to countries that were barely affected a few years ago. The incidence of syphilis and other STDs has also increased dramatically in almost all the NIS. Hepatitis B continues to have a large health and economic impact on all countries in the European Region. Overall mortality from infectious and parasitic diseases demonstrates a typical east-west gap.

Medical segment is a constituent part of the civil protection of the Republic of Croatia (1). The scope of work and field of competence of the civil defense is legally regulated by the Law on Internal Affairs, II A Civil Protection and those tasks stand in agreement with the II Additional Protocol of the Geneva Conventions from August 12th 1949. (Protocol II, 1977) (5) and they implicitly include giving first aid, mitigation of the ground or epidemiological protection etc. Apart from those tasks, Civil defense had especially in peacetime and wartime the task to protect and rescue civilians during natural disasters and catastrophes in cases when the usual defense forces are not sufficient. The protection in those cases includes various activities in range from epidemiological protection to protection and rescuing in the case of contaminated ecosystem etc. Apart from medical contents of the civil defense implying first

aid and terrain rehabilitation, the civil defense also includes protection of civilian's outbreaks (1).

## CONCLUSION

Infectious diseases will be a lingering transnational problem. Numerous recent trends favor the spread of communicable diseases. These include: new and re-emerging infectious agents, new drug resistant strains, pharmaceutical research not keeping pace with microbial resistance, erosion of disease surveillance systems, increased urban population density and number of persons living in poverty, increased susceptible populations e.g. the aged, wider distribution of communicable disease vectors due to global warming (6). Health implications of Global and Local trend require the own national level action cooperation and partnerships. The information in this paper is drawing from results and discussions with services in the health and defense sectors in Croatia, during in post wartime in 2000/2001. Today in Croatia, especially after the War (1991-1995), war crisis with secondary war effect such as epidemic diseases have proven to us that the epidemic factor is important and permanent risk for life and environment especially in period of various transition. The epidemiological protection with health services will have to include in usual protection. Therefore, a protection plan needs to be developed, based on a high-quality assessment. The assessment, as a warning on the onset, development and consequences of a diseases; the assessment of the probability of the onset of the disease, as well as the definition of the scope of a possible danger, need to include the presumption on the development of the disease in its acute, developmental and final stages, as well as the degree of its impact on people, material means and environment. The Republic of Croatia must is to establish the new emergency management organization for various nature and man-made disasters because the present organization of the Civil Protection in Republic of Croatia is not modern and efficiency.

## SUMMARY

Infective diseases are permanent danger for population environment and determinant of health status. In the past, infective diseases and great epidemics of infective diseases resulted in high incidence, morbidity and mortality and dominant irreversible effect. Civil defense, Health policy, the structure and organization of defense and health services and most importantly, health status have all been affected by the transition, which started in 1990 and is still continuing. Assessments and Plans for protecting civilians from the consequences of larger epidemic of infectious diseases and the other diseases requires the permanent engagement of health protection services in Croatia.

## REFERENCES

1. Sugnetić, T. (1998) CBMTS. Industry 1. MOD RH.ASA.315-320.
2. Bettcher R. (March 1997) WHO/PPE/97, Geneva 25-30
3. Anonimus (2000) CNIOPH, Zagreb.251.249-245.14-15
4. Borčić, B. (1998) Epidemiologija zaraznih bolesti.Zagreb.1998.
5. Anonimus (1991) SCKJ, Ženevske konvencije.1949.
  - 1.Dopunski protokol I i II.Protokoli I Glava VI i
  - 2.Dopunski protokoli od 1977.
6. Asvall, J.E. (1997) WHO ROFEC.EUR/RC48/2.Copenhagen.
  - 1.Report of the Regional Director 1996-1997.5.

## KEY WORDS

The infectious diseases, civil defense, Croatia